

MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET
(FOR USE WITH FORM PTO-875)

SERIAL NO.

09982554

FILING DATE

10/18/01

APPLICANT(S)

CLAIMS

| | AS FILED | | AFTER 1st AMENDMENT | | AFTER 2nd AMENDMENT | |
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| TOTAL IND. | 2 | | | | | |
| TOTAL DEP. | 23 | | | | | |
| TOTAL CLAIMS | 25 | | | | | |

BEST AVAILABLE COPY

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| TOTAL IND. | | | | | | |
| TOTAL DEP. | | | | | | |
| TOTAL CLAIMS | | | | | | |

* MAY BE USED FOR ADDITIONAL CLAIMS OR AMENDMENTS